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PTO/SB/22 (12-04)
Approved for use through 7/31/2008. OMB 0551-0031

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2005 Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4918). Application Number	Under the Paperwork Reduction Act of 1985, no persons are require	ed to respond to a collection	of Information unless if of	Isplays a valid OMB control number	
Fees pursuant to the Consolidated Appropriations Act, 2003 (N.R. 4819.) Application Number Q9/376604 Filled August 18, 1999 For THERAPEUTIC COMPOSITIONS THAT ALTER THE IMMUNE RESPONSE And Unit 1642 Examiner G. B. Nickol This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a repty in the above identified application. The requested extension and fee are as follows (check time period desired and enter the appropriate fee below): The month (37 CFR 1.17(a)(1)) \$120 \$60 \$60.00 Two months (37 CFR 1.17(a)(2)) \$450 \$225 \$5 Three months (37 CFR 1.17(a)(3)) \$1020 \$510 \$5 Four months (37 CFR 1.17(a)(4)) \$1590 \$795 \$5 Five months (37 CFR 1.17(a)(5)) \$2160 \$1080 \$5 X Applicant claims small entity status. See 37 CFR 1.27. A check in the amount of the fee is enclosed. Payment by credit card. Form PTO-2038 is attached. X The Director has already been authorized to charge fees in this application to a Deposit Account. X The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, Deposit Account Number 18-1945 I have enclosed a duplicate copy of this sheet. I am the	PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		DOCKET Manuper (DOCKER Mailtiper (Obsories)	
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Art Unit 1642 Examiner G. B. Nickol This is a request under the provisions of 37 CFR 1.138(a) to extend the period for filling a reply in the above identified application. The requested extension and fee are as follows (check time period desired and enter the appropriate fee below): Fee				August 18, 1999	
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(647) 054 7000	Signature				
	Gloria Fuentes		(617) 951-7000		
Typed or printed name Telephone Number	Typed or printed name		• • • •		
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(e) are required. Submit multiple forms it more than one signature is required, see below.	NOTE: Signatures of all the inventors or assignees of record of the inventors of assignees of record of the none standards is required, see below.	the entire interest or their re	presentative(s) pro réquir	ed. Submit multiple forms it more	

	
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